Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.: NM 04175 (b)

RECEIVED
OCT 24 '89
O. C. D.
ARTESIA, OFFICE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Empire Abo Unit "R"

9. WELL NO.: 3

10. FIELD AND POOL, OR WILDCAT: Empire Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 17 - 18S - 27E

12. COUNTY OR PARISH: Eddy

13. STATE: NM

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED
NOV 2 - '89
O. C. D.
ARTESIA, OFFICE

1. OIL WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR: ARCO Oil and Gas Company

3. ADDRESS OF OPERATOR: P. O. Box 1610, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1980 FNL & 1980 FEL (Unit Letter G)

14. PERMIT NO.: 30 - 015 - 00914

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3436 DF

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	
(Other) Recomplete Abo X		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Purpose to test existing Abo perf 5392 - 5454. If unproductive, set CIBP & perf Abo f/5320-5360 & evaluate.

18. I hereby certify that the foregoing is true and correct

SIGNED Kenneth Gosnell TITLE Engr. Tech. Spec. 915-688-5672 DATE 10/23/89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE 10-31-89

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side